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March 7, 2023

Ms. Trish Lollo  
President  
St. Louis Children's Hospital  
One Children's Place  
St. Louis, MO 63110

Dear Ms. Lollo:

Given the recent and disturbing account of a former employee of the Transgender Center at St. Louis Children's Hospital ("Transgender Center"), I write to seek answers about your use of several life-altering medical interventions.<sup>1</sup> The family is the most basic unit of society and as such, "parents have the inalienable right and responsibility to educate and rear their children."<sup>2</sup> Unfortunately, there are people who want to override parents' decisions. Their efforts result in the erosion of parents' rights to make medical decisions for their children. In some cases, those decisions have resulted in parents' losing all rights when it comes to their children.

Your former employee's account reveals that this override of parents' rights has become more and more prevalent. The employee stated, "[W]hen there was a dispute between the parents, it seemed the center [Transgender Center] always took the side of the . . . parent [who gave consent to treatment]. My concerns about . . . [the] approach to dissenting parents grew in 2019 when one of our doctors actually testified in a custody hearing against a father who opposed a mother's wish to start their *11-year-old daughter* on puberty blockers."<sup>3</sup> This employee went on to state, "The doctors I worked alongside at the Transgender Center said frequently about the treatment of our patients: 'We are building the plane while we are flying it.'"<sup>4</sup>

Parents' rights are being further eroded by the courts or state agencies. Child protective services ("CPS") has taken children from the homes of loving parents because such parents do not support irreversible, life-altering surgeries and other medical interventions, such as cross-sex

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<sup>1</sup> See Jamie Reed, *I Thought I Was Saving Trans Kids. Now I'm Blowing the Whistle.*, THE FREE PRESS, (Feb. 25, 2023, 3:11 PM), [https://www.thefp.com/p/i-thought-i-was-saving-trans-kids?utm\\_source=substack&utm\\_medium=email](https://www.thefp.com/p/i-thought-i-was-saving-trans-kids?utm_source=substack&utm_medium=email).

<sup>2</sup> "Principles," American College of Pediatricians, (last visited Feb. 25, 2023), <https://acpeds.org/about>.

<sup>3</sup> *Supra* at n.1.

<sup>4</sup> *Id.*

hormones, on their children diagnosed with gender dysphoria. For example, in California, Abigail Martinez lost custody of her daughter, and a court permitted only one hour of visitation each week because Ms. Martinez did not want her daughter to receive gender-transition interventions.<sup>5</sup> In Illinois, Jeannette Cooper lost a custody battle with her ex-husband over their daughter's decision to receive gender-transition interventions.<sup>6</sup> And in 2018, a Cincinnati couple lost custody of their 17-year-old daughter because they would not consent to cross-sex hormones.<sup>7</sup>

Your hospital's website touts the role it plays in delivering "gender affirming" medical interventions, noting your mission is "to provide all-encompassing care to kids and young adults who identify as transgender, gender non-conforming, non-binary or genderqueer."<sup>8</sup> It further states, "Beginning at age 12, all patients will have a private, confidential conversation with a Transgender Center team member," and that "[f]or patients younger than 18, parents are included for as much of the medical visit as possible."<sup>9</sup> No explanation is given of what criteria, if any, are used to make determinations about the inclusion of parents "for as much of the medical visit as possible."<sup>10</sup>

As noted earlier, I have concerns about the use of life-altering, irreversible medical interventions on children with healthy bodies. Further, I want to ensure parents are a key part of any medical decisions for their children. Parents have the right and responsibility to make medical decisions for their children, and they should be free to do so without undue pressure or interference from medical establishments.

To help me understand how you engage with parents and their children in these matters, please respond in writing to the following questions and requests:

1. Has St. Louis Children's Hospital ever delivered medical interventions for a minor diagnosed with gender dysphoria whose parents have objected to such interventions?
2. Has St. Louis Children's Hospital ever provided a vaginoplasty, metoidioplasty, phalloplasty, chest reconstruction, breast augmentation, facial feminization, or facial masculinization to a child over the objection of one or both parents?
3. Please provide a summary of the policies and protocol(s) used to consult with parents when parents of minors, or minors themselves, contact the hospital for services related to

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<sup>5</sup> Tori Richards, "Mother of trans teenager: Los Angeles County killed my daughter," *Washington Examiner*, March 22, 2022, <https://www.washingtonexaminer.com/news/mother-of-transgender-teenager-los-angeles-county-killed-my-daughter>.

<sup>6</sup> Alec Schemmel, "Mother who questioned 12-year-old daughter's gender transition loses custody battle," *The National Desk*, August 1, 2022, <https://fox17.com/news/nation-world/mother-who-questioned-12-year-old-daughters-gender-transition-loses-custody-battle>.

<sup>7</sup> Kevin Grasha, "Judge throws out lawsuit by parents of transgender teen held at Children's Hospital," *Cincinnati Enquirer*, November 21, 2018, <https://www.cincinnati.com/story/news/2018/11/21/federal-judge-throws-out-lawsuit-parents-transgender-teen/2077892002/>.

<sup>8</sup> <https://www.stlouischildrens.org/conditions-treatments/transgender-center>.

<sup>9</sup> <https://www.stlouischildrens.org/conditions-treatments/transgender-center/what-to-expect-the-first-visit>.

<sup>10</sup> *Id.*

a possible gender dysphoria diagnosis or a desire for “gender affirming” care. Please include a copy of the consent form(s) used for such services (including for puberty blockers, estrogen or feminizing medications, testosterone or masculinizing medications, progesterone or other progestogens, and surgeries), the timing or juncture at which consent is obtained, including whether consent is obtained anew before escalating to a new treatment phase (for example, if clinicians recommend the introduction of cross-sex hormones to a child currently receiving GnRHA treatments), and please note whether each form is for the child, parent, or both.

4. Please list how many, if any, reports or inquiries hospital staff have made to child protective services regarding a child presenting for, or currently receiving, “gender affirming” care.
5. Please list how many, if any, reports or inquiries hospital staff have made to CPS in response to a parent (or parents) who will not consent to medical interventions that would hormonally or surgically transition his or her child.
6. Please describe the hospital’s process for handling a case if parents do not agree with a doctor’s recommended plan of care for their child diagnosed with gender dysphoria. Please also describe the hospital’s process for handling a case in which two parents share custody of their child, but only one parent agrees with a doctor’s recommended plan of care for his or her child diagnosed with gender dysphoria.
7. Please describe the hospital’s process for handling a case if a parent refuses (or both parents refuse) to consent to medical or surgical interventions for purposes of gender transition desired by the child and/or recommended by the child’s care providers.
8. Please describe the minimum number of mental health assessments and/or mental health therapy sessions the hospital requires a child to receive prior to undergoing medical or surgical interventions for purposes of gender transition. Also, please specify what types of clinicians are assessing and treating the patients (for example, licensed psychiatrists, psychologists, clinical social workers, behavioral health technicians, etc.) Are all the children and adolescents diagnosed with gender dysphoria diagnosed by either a licensed psychiatrist or psychologist, or are there other types of clinicians making the diagnoses? Please also specify whether such therapy sessions involve parents and, if so, what type of involvement with parents is required. For example, are parents required to consent to therapy sessions, to attend therapy sessions, to participate in family therapy sessions with the child, or to agree with or consent to a therapists’ referral of the child for medical or surgical interventions before such interventions are performed?
9. Please provide the number of children you have seen at your hospital (including the Transgender Center) who have received cross-sex hormones from the hospital, the number who have received puberty blockers from the hospital, and the number who have obtained the surgeries listed above at the hospital. Additionally, please provide the number of children for whom the hospital, including the Transgender Center, has provided referrals to obtain cross-sex hormones, and referrals for vaginoplasty,

metoidioplasty, phalloplasty, chest reconstruction, breast augmentation, facial feminization, or facial masculinization. Please include at what age each child in each of these categories has been given the referrals.

10. Please provide the number of children assessed for, diagnosed with, or treated for gender dysphoria by the hospital (including those seen in the Transgender Center and those seen by other departments and assessed for, diagnosed with, or treated for gender dysphoria or referred for “gender affirming” treatments) who are under the ward of the state or under the guardianship of someone other than their parent(s). Please provide the number of children you have seen at your hospital whose parents both granted consent to their child’s treatment at your hospital, the number of children you have seen where one parent granted consent to his or her child’s treatment over the objection of the other parent, the number of children you have seen in which consent was obtained due to court intervention, and the number of children you have seen for whom another guardian not listed here granted consent for the treatment.

I appreciate your response to these questions and requests (instructions enclosed) no later than 14 days after receipt of this letter.

Sincerely,



Virginia Foxx  
Chairwoman  
U.S. House Committee on Education and the Workforce

Enclosure